



LAKEVILLE

Enter your transmittal number

W203009

Transmittal Number

Your unique Transmittal Number can be accessed online: <http://mass.gov/dep/service/online/trasmfrm.shtml> or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

**Massachusetts Department of Environmental Protection****Transmittal Form for Permit Application and Payment**

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three copies of this form will be needed.

Copy 1 - the original must accompany your permit application.  
Copy 2 must accompany your fee payment.  
Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

MassDEP  
P.O. Box 4062  
Boston, MA  
02211

Note:  
For BWSC Permits,  
enter the LSP.

JAN - 9 2008

DEP  
SOUTHEAST REGION**A. Permit Information**

BWP 1038

1. Permit Code: 7 or 8 character code from permit instructions

Wastewater

3. Type of Project or Activity

Industrial Sewer User

2. Name of Permit Category

**B. Applicant Information - Firm or Individual**

Teknor Apex Company

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

2. Last Name of Individual

330 Oakhill Ave

5. Street Address

Attleboro

6. City/Town

Ted Hanley

11. Contact Person

3. First Name of Individual

4. MI

MA

7. State

02703

8. Zip Code

508.222.2700

9. Telephone #

x 7895

10. Ext. #

thanley@teknorapex.com

12. e-mail address (optional)

**C. Facility, Site or Individual Requiring Approval**

Teknor Apex Company

1. Name of Facility, Site Or Individual

330 Oakhill Ave

2. Street Address

Attleboro

3. City/Town

130164

8. DEP Facility Number (if Known)

MA

4. State

02703

5. Zip Code

508.222.2700

6. Telephone #

7. Ext. #

050306609

9. Federal I.D. Number (if Known)

10. BWSC Tracking # (if Known)

**D. Application Prepared by (if different from Section B)\***

1. Name of Firm Or Individual

2. Address

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. Contact Person

9. LSP Number (BWSC Permits only)

**E. Permit - Project Coordination**

1. Is this project subject to MEPA review? ☐ yes ☒ no  
If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

**F. Amount Due****Special Provisions:**

- ☐ Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less).  
*There are no fee exemptions for BWSC permits, regardless of applicant status.*
- ☐ Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).
- ☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).
- ☐ Homeowner (according to 310 CMR 4.02).

349100

Check Number

1605

Dollar Amount

1/3/08

Date

DEP Use Only

Permit No:

Rec'd Date:

Reviewer: